Case 19-33261-CMG Doc 70 Filed 06/29/21 Entered 06/29/21 11:14:39 Desc Main

Fill in this info	ormation to identify your	case:	Page 1 of 8
Debtor 1	Diana Waher-Sala		THE STATE OF THE S
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY	
Case number	19-33261		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	170,516.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,217.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	181,733.00
Pai	t2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	190,428.00
3,	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	46,839.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	124,037.00
	Your total liabilities	\$	361,304.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,619.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,928.00
Par	43 Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Diana Waher-Sala

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,960.00

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	46,839.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	46,839.00

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Fill	in this information to identify your c	ase:			190				
Del	otor 1 Diana Wahe	r-Sala							
_	otor 2 ouse, if filing)								
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW J	ERSEY						
Cas	se number 19-33261					Check if this is:			
(If kr	nown)					An amende	d filing		
_						☐ A suppleme	_		chapter
	fficial Form 106I					MM / DD/ Y	YYY		
	chedule I: Your Inc								12/15
sup spo atta	es complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp th vou, do not include	ouse i	is liv mati	ing with you, incluen	ude informa	tion about	your
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filin	ig spouse	
	If you have more than one job,	Employment status*	Employed		☐ Emplo	☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not e	☐ Not employed			
	employers.	Occupation	Self-employed						
	Include part-time, seasonal, or self-employed work.	Employer's name	Precious Moment	s Chi	ld C	are			
	Occupation may include student or homemaker, if it applies.	Employer's address	941 Vaughn Aven Toms River, NJ 0						
		How long employed ti			t for	Additional Emplo	yment Infor	mation	
Par	t 2: Give Details About Mor	nthly Income							
E sti spou	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for	any l	ine, write \$0 in the	space. Inclu	de your non	-filing
f yo nore	u or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co	ombine the information t	or all e	emplo	oyers for that perso	n on the line	s below. If y	ou need
						For Debtor 1	For Debte		
2.	List monthly gross wages, salar deductions). If not paid monthly, or	ry, and commissions (be calculate what the monthl	efore all payroll y wage would be.	2.	\$	5,160.00	\$	N/A	
3.	Estimate and list monthly overti	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	5,160.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Deb	tor 1	Diana Waher-Sala	<u>.</u>	Ca	ase number (if kr	iown)	19-33	3261	
				1700					
				F	or Debtor 1			Debtor 2 or	
	Cop	y line 4 here	4.	9	5,160	. 00	s non-	filing spouse	_
5	Line	oll novel deduction	7.	4	5,160	.00	• <u> </u>	N/A	<u>\</u>
5.		all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	899	.00	\$	N/A	١
	5b.	Mandatory contributions for retirement plans	5b.	\$	0	.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0	.00	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0	.00	\$	N/A	
	5e.	Insurance	5e.	\$	0	.00	\$	N/A	N.
	5f.	Domestic support obligations	5f.	\$	0	.00	\$	N/A	<u> </u>
	5g.	Union dues	5g.	\$	0	.00	\$	N/A	\
	5h.	Other deductions. Specify:	5h.+	- \$	0	.00	+ \$	N/A	Λ.
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	899	.00	\$	N/A	<u>.</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,261	.00	\$	N/A	\
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	1 500	00	\$		_
	8b.	Interest and dividends	8b.	\$.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property coefficients.		7			`_	N/A	
	8d.	settlement, and property settlement. Unemployment compensation	8c.	\$.00	\$	N/A	_
	8e.	Social Security	8d.	\$.00	\$	N/A	
	8f.	Other government assistance that you regularly receive	8e.	\$	659	.00	\$	N/A	\
	01.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$		00	\$		
	8g.	Pension or retirement income	8g.	\$.00	φ	N/A	
	8h.	Other monthly income. Specify: Pro rata tax refund	8h.+				+ \$	N/A	_
				_		.00	_	INIP	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,358	.00	\$	N/	A
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		6.619.00	+ \$		N/A = \$	6,619.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	0,013.00			- IV/A	0,019.00
11;	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not actify:	depend					chedule J. 11. +\$	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The res	ult is th	e c	ombined mon	thly in	ncome		
	vvrit	e that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certai</i>	n Liabil	litie	s and Related	Data	, if it		0.045.55
	appl	es						12. \$	6,619.00
								Combi	
13,	Do y	ou expect an increase or decrease within the year after you file this form No.	?					month	ly income
		Yes. Explain: Income started 5/8/21 to replace unemployment of	compe	ens	ation during	g Pa	ndemi	С	

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Debtor 1 D	iana Waher-Sala	Case number (if known)	19-33261
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Official Form B 6l Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Self-employed	
How long employed	Since 2000	
Address of Employer	Lil Sprouts Educational Center	
	941 Vaughn Avenue	
	Toms River, NJ 08753	

Official Form 106l Schedule I: Your Income page 3

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Fill	in this information to identify your case:				
		Alkaren paynymin	0.1		
	Diana Waher-Sala		Che	eck if this is: An amended filing	
Deb	otor 2			J.	wing postpetition chapter
(Sp	ouse, if filing)		ч	13 expenses as of	the following date:
Unit	ted States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			MM / DD / YYYY	
Cas	se number 19-33261				
(If k	hown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/15
IIII	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f	e filing together, both form. On the top of a	n are equ	ually responsible fo	or supplying correct
nur	mber (if known). Answer every question.		-	, , ,	
_	t 1 Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Househo	old of Del	btor 2.	
2.	Do you have dependents?				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the		-03		□ No
	dependents names.	-			☐ Yes
					□ No
				-	Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include No	-			1 1 63
	expenses of people other than yourself and your dependents?				
Par					
exh	imate your expenses as of your bankruptcy filing date unless your senses as of a date after the bankruptcy is filed. If this is a supploficable date.	ou are using this forr lemental <i>Schedule J</i> ,	m as a s , check t	upplement in a Cha he box at the top o	pter 13 case to report f the form and fill in the
Incl	lude expenses paid for with non-cash government assistance if	vou know			
the	value of such assistance and have included it on Schedule I: You	our Income			
(OH	ficial Form 106l.)		100	Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	1,404.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	4c. Home maintenance, repair, and upkeep expenses			\$	250.00
_	4d. Homeowner's association or condominium dues			\$	0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5.	\$	0.00

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Debtor 1	Diana Waher-Sala		aber (if known)	19-33261	
6. Utili	ies:				
6a.	Electricity, heat, natural gas	6a.	\$	150.00	
6b.	Water, sewer, garbage collection	6b.		55.00	
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		128.00	
6d.	Other. Specify: Cable/Internet	6d.		138.00	
Foo	d and housekeeping supplies	7.	\$		
	dcare and children's education costs	8.	\$	550.00	
	hing, laundry, and dry cleaning	9.		0.00	
	onal care products and services	10.		150.00	
	cal and dental expenses	11.		150.00	
	sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	150.00	
Do n	ot include car payments.	12.	\$	300.00	
3. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00	
4. Cha	itable contributions and religious donations	14.		25.00	
5. Ins u	rance.		-	23.00	
Do n	ot include insurance deducted from your pay or included in lines 4 or 20.				
15a.	Life insurance	15a.	\$	0.00	
15b.	Health insurance	15b.	\$	0.00	
	Vehicle insurance	15c.	\$	128.00	
15d.	Other insurance. Specify:	15d.	\$	0.00	
6. Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00	
Spec	ify:	16.	\$	0.00	
	Ilment or lease payments:		-		
	Car payments for Vehicle 1	17a.	\$	0.00	
	Car payments for Vehicle 2	17b.	\$	0.00	
	Other. Specify:	17c.	\$	0.00	
	Other. Specify:	17d.	\$	0.00	
B. You	payments of alimony, maintenance, and support that you did not report as				
dedi	icted from your pay on line 5, Schedule I. Your Income (Official Form 1061).	18.	\$	0.00	
J. Othe	r payments you make to support others who do not live with you.		\$	0.00	
Spec		19.			
U ₊ Othe	r real property expenses not included in lines 4 or 5 of this form or on Sche				
	Mortgages on other property	20a.		0.00	
	Real estate taxes	20b.	\$	0.00	
	Property, homeowner's, or renter's insurance	20c.	\$	0.00	
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00	
	Homeowner's association or condominium dues	20e.	\$	0.00	
1. Othe	r: Specify: Misc	21,	+\$	250.00	
2. Calc	ulate your monthly expenses				
	Add lines 4 through 21.		·		
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,928.00	
			\$		
220.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,928.00	
3. Calc	ulate your monthly net income.				
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,619.00	
23b.	Copy your monthly expenses from line 22c above.	23b.			
		200.	¥	3,928.00	
23c.	Subtract your monthly expenses from your monthly income.				
	The result is your monthly net income.	23c.	\$	2,691.00	
4. Do y	ou expect an increase or decrease in your expenses within the year after you	u file this	form?		
For e	cample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?	mortgage p	payment to incre	ase or decrease because of a	
III N	,				
□ Y ₁	es. Explain here:				

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Fill in this information to identify your case:					
Debtor 1	Diana Waher-Sala	1			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JER	RSEY		
Case number	19-33261				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
₩ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that they are true and correct.	the summary and schedules filed with this declaration and
X /s/ Diana Waher-Sala Diana Waher-Sala	Signature of Debtor 2
Signature of Debtor 1	- 3
Date <u>May 27, 2021</u>	Date